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It is not necessary to give a detailed summary of its contents. It is divided into thirty-five parts, each of which is contributed by one or more persons, and the list of contributors numbers more than ninety names. Thirty-two learned or technical societies coöperated, more or less, though all coöperated actively in the preparation of the matter. Nearly fifty of the contributors are professors or instructors in American universities and colleges, and the rest are experts—many of them in the service of the national government—in the subjects treated by them. The arrangement of the book is admirable. By grouping all the matter relating to any one general topic in a single department, and by supplementing the whole work with an excellent index, the vexations often inevitable when one is consulting an annual handbook alphabetically arranged, are completely avoided.

EDWARD STANWOOD.

ANNUAL REPORT FOR 1909 OF THE CHIEF MEDICAL OFFICER
OF THE BOARD OF EDUCATION (LONDON), 1910. 11d.

In 1907 the Education Act required each Local Education Authority to provide for the medical inspection of children immediately before, or at the time of, or as soon as possible after their admission to a public elementary school, and on such other occasions as the Board of Education direct. The Code for 1909-10 required that all children admitted since the first of August, 1909, and all children who were expected to leave school before July 31, 1910, should be examined with regard to the conditions of health and physical development. Perhaps this second group called "leavers" is the more important since it will tell the story of the practice or neglect of hygiene during school life and may determine certain questions of employment of the child. In addition they examined any children who were reported by the teachers to be in bad physical condition. It is probable that at least 250,000 of this special class were examined. To carry out this Act has required the examination of about a million and a half children. The provisions of the Act and the Code have been generally obeyed throughout the Kingdom with the exception of London.

Since the examinations were not uniform throughout the whole Kingdom it is difficult to give any statistics approaching absolute accuracy, but it may be stated in general terms that of the six million children in the public elementary schools of England and Wales, about 10 per cent. are defective in vision, from 3 per cent. to 5 per cent. defective in hearing, 8 per cent. have adenoids or enlarged tonsils of sufficient degree to require surgical treatment, from 20 per cent. to 40 per cent. suffer from extensive and injurious decay of the teeth, about 1 per cent. are affected with tuberculosis, and from one half per cent. to 2 per cent. are afflicted with heart disease. These figures certainly give a somewhat gloomy picture of the condition of the pupils in the elementary schools. No statistics on a large scale have

ever been gathered in this country so that it is impossible to introduce comparisons, but from the figures which are available in this country it is apparent that conditions among our public school children would well repay state-wide study. This report is filled with interesting studies of local conditions and gives a very good idea of the extent of the effort which is being made in England to insure to the country a healthy working population.

WM. B. BAILEY.

Yale University.

REPORT OF COMMITTEE ON STANDARD TABLES.

The undersigned members of a committee appointed at the last annual meeting of this Association to coöperate with a committee of the American Public Health Association to consider forms of tables employed in registration reports, federal, state, and municipal, and to draft a set of standard tables, have the honor to submit the following report of progress.

The form of statistical tables is dependent primarily upon the information which the tables are to convey. That information always consists in certain statistical totals combined in various ways. In American registration reports, as a class, the space given to tables regarding deaths greatly exceeds that given to all other tables. For this reason the present report is confined to mortality tables.

American registration of deaths is now based in nearly all cases upon a standard certificate. Hence the information open to tabulation is practically identical. Part of the information conveyed on a certificate is merely for identification or corroboration and has no statistical value. This is true regarding the decedent's name and that of the father and mother, the date of birth as distinguished from the age, the length of residence, the place and date of burial, and the name and address of the undertaker. After excluding these items, there remain for use in statistical tabulation the following:

- (1) Place of death,
 - (2) Time of death;
- as physical characteristics of the decedent:
- (3) Sex,
 - (4) Age,
 - (5) Race or color,
 - (6) Cause of death;
- as social or economic characteristics of the decedent:
- (7) Birthplace,
 - (8) Birthplace of father,
 - (9) Birthplace of mother,
 - (10) Marital condition,
 - (11) Occupation.